

## FINANCIAL STATUS REPORT

(Long Form)

(Follow instructions on the back)

		Federal Grant or Other I     By Federal Agency	dentifying Number Assigns	ed	OMB Approval Page of No. 1 1 1 pages
	ization (Name and complete a	ddress, including ZIP code)			page:
P O BOX 5616	of the second se				
		5. Recipient Account Numl 1133, TITLE II	per or Identifying Number	6. Final Report  ☐ Yes ☐ No	7. Basis Cash Accrual
8. Funding/Grant Period (See instructions) From: (Month, Day, Year) 9/30/2004 To: (Month, Day, Year) 5/19/2005			9. Period Covered by this Report From: (Month, Day, Year)  10/1/2003  To: (Month, Day, 1/2004)		To: (Month, Day, Year) 9/30/2004
10. Transactions:			I Previously Reported	I This Period	III Cumulativa
a. Total cutlays			Fleviously Reported	1,463.91	Cumulative 1,463,91
b. Refunds, rebates, etc.					0.00
c. Program income used in accordance with the deduction alternative					0.00
d. Net outlays (Line a, less the sum of lines b and c)			0.00	1,463.91	1,463.91
Recipient's share	of net outlays, consisting of	de de la companya de La companya de la co			
	in-kind) contributions all awards authorized to be use	d to match this award			0.00
g. Program income used in accordance with the matching or cost					0.00
sharing alternative					0.00
h. All other recipient outlays not shown on lines e, f or g					0.00
i. Total recipie	nt share of net outlays (Sum or	lines e, f, g and h)	0.00	0.00	0.00
j. Federal shar	e of net outlays (line d less lin	e i)	0.00	1,463.91	1,463.91
k. Total unliquidated obligations					
I. Recipient's share of unliquidated obligations					
m. Federal share of unliquidated obligations					***************************************
n. Total Federal share (sum of lines j and m)					1,463.91
o. Total Federal funds authorized for this funding period					14,666,337.22
p. Unobligated balance of Federal funds (Line o minus line n)					14,664,873.31
					14,004,070.01
Program income, consisting of:  q. Disbursed program income shown on lines c and/or g above					
r. Disbursed program income using the addition alternative					
s. Undisbursed program income					
t. Total progra	m income realized (Sum of line	es q, r and s)			0.00
a. Type of Rate (Place "X" in appropriate box)					
11. Indirect Expense	b. Rate	c. Base	etermined d. Total Amount	Final e. F	☐ Fixed Federal Share
governing legitalist 100 INCL	istation.  LUDES INTEREST OF 1  I certify to the best of my knunliquidated obligations are	necessary or information req \$55,344.51. owledge and belief that this for the purposes set forth in	report is correct and cor		ays and
NANCY L. WO	RLEY, SECRETARY O	FSTATE		334-242-7206	
Signature of Authorized Certifying Official  Date Report Sul May 20, 200					
<del>~/25   { \\/}**</del>					

Standard Form 289 (Rev. 7-97)

## 2004 EXPENDITURES FOR HAVA, TITLE II 2004 FISCAL YEAR



## EXPENDITURES MADE FOR VOTING INFORMATION AND VOTERS WHO REGISTER BY MAIL:

DATE PAID VENDOR
11/2/2004 ROMANOW CONTAINER

**AMOUNT COMMENTS** 1,493.61 MATERIALS

TOTAL FOR TITLE II
EXPENDITURES FOR 2004 FISCAL
YEAR

1,493.61